

EXHIBIT A

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF QUEENS

MERRIMACK MUTUAL FIRE INSURANCE
COMPANY a/s/o WILDFLOWER ESTATE
CONDOMINIUM II,

Plaintiff,

-against-

THE TRAVELERS COMPANIES INC., a/k/a,
THE TRAVELERS INDEMNITY COMPANY

Defendants.

Index No.:

Plaintiff Designates
Queens County as
Place of Trial

SUMMONS WITH NOTICE

The basis of Venue is plaintiff's
subrogor's residence.

TO THE ABOVE NAMED DEFENDANT:

YOU ARE HEREBY SUMMONED to appear in this action by serving a notice of appearance on plaintiff's attorney within twenty days after the service of this summons, exclusive of the day of service, or within thirty days after service is complete if this summons is not personally delivered to you within the State of New York.

TAKE NOTICE THAT this is a subrogation action, stemming from the subrogor's damages that occurred due to the negligence and the intentional spoliation of evidence by defendant THE TRAVELERS COMPANIES INC., a/k/a, THE TRAVELERS INDEMNITY COMPANY, which resulted following a fire loss event on or about February 15, 2017 and an evidence inspection on April 19, 2017 (See Exhibit "A"); and that in case of your failure to appear, judgment will be taken against you by default for a reasonable sum that exceeds the jurisdictional limits of the lower Courts, and upon information and belief is at least \$290,417.84, inclusive of our insured's \$5,000 deductible, (See Exhibit "B") as well as the costs and disbursements of this action, and such other and further relief as this Court deems just and proper.

The basis of the venue designated is the plaintiff's subrogor's residence located at: 42-25 21st Street, Queens, NY 11101.

Dated: New York, New York
August 29, 2018

Yours, etc.



FAUST GOETZ SCHENKER & BLEE

By: Jeffrey Rubinstein
Attorneys for Plaintiff
Two Rector Street, 20th Floor
New York, New York 10006

(212) 363-6900

Our File No.: 14692-MMS

TO:

Via Secretary of State

THE TRAVELERS COMPANIES INC., a/k/a,
THE TRAVELERS INDEMNITY COMPANY
One Tower Square
Hartford, CT 06183

Exhibit “A”

PLEASE PRINT AND LEAVE BUSINESS CARD

P:\Claims\Forms\Exam Attendance Sheet.doc

**Russo Consultants**

Fire Investigation and Analysis Services

Gene Pietzak, IAAI-CFI - IAAI ECT
Fire Investigator499 Jericho Tpke., Ste. 203, Mineola, NY 11501
Cell: 516 330-0372 | Office: 516 513-1388
Corporate Office: 516 294-8644 | Fax: 516 747-1009
Email: gpietzak@tjrusso.com | www.tjrusso.com

ALEXANDRA M. SANTO

TWO RECTOR STREET
NEW YORK, NY 10006
TEL: 212-363-6900
FAX: 212-363-1090570 WEST MT. PLEASANT AVENUE
LIVINGSTON, NJ 07039
TEL: 973-422-9600
FAX: 973-422-9666email: ASanto@fgsb.com
www.fgsb.comModine Manufacturing Company
Commercial Products Group1500 DeKoven Avenue
Racine, Wisconsin 53403-2552Tel. 952.277.9261
Fax 262.636.1665
b.e.bixby@na.modine.com**Bryan Bixby**
Senior Service Technician**NATHAN R. SIAHPUSH, PE, CFEI**
FORENSIC CONSULTANTPE#: E-16382 (NE)
CFEI#: 17237-9498[310] 907-6270
nsiahpush@esinationwide.com**JONATHAN SIVILS, IAAI-CFI, FIT, CFEI**
FIRE INVESTIGATOR3620 HORIZON DRIVE
SUITE 200
KING OF PRUSSIA, PA 19406PH (610) 941-5599
FAX (610) 941-1288
CELL (215) 970-3114
E-MAIL: JSIVILS@RIMKUS.COM
WWW.RIMKUS.COMModine Manufacturing Company
Commercial Products Group1500 DeKoven Avenue
Racine, Wisconsin 53403-2552Tel. 267.981.5698
e.f.mcconnell@na.modine.com**Esker F. McConnell II**
Service Tech II**Kaitlin Rohoczy**
Fire Investigator
Investigative ServicesKrohocz@travelers.com
travelers.comThe Travelers Companies, Inc.
3 Huntington Quadrangle
302S-A
Melville, NY 11747
914.200.8879 CELL**LGI FORENSIC ENGINEERING, P.C.**
Engineers, Architects, Consultants, and Investigators**Andrew Pietropaolo, E.E., CFEI**
Senior Electrical Consultant7 Reservoir Road • North White Plains, NY 10603
C: (203) 770-9675 • T: (914) 670-0208 • F: (914) 670-0210
andrew@lgiforensic.com • www.lgiforensic.com

Exhibit “B”

AGENT: MACKOUL RISK SOLUTIONS LLC
25 NASSAU LANE
ISLAND PARK NY 11558

MEMO:

TYPE: SIGNLOS

MAIL AFFILIATED ADJUSTMENT GROUP
TO
3000 MARCUS AVE STE 3W3
LAKE SUCCESS NY 11042-1009

NOTE: PLEASE REMOVE THIS STUB
BEFORE CASHING OR DEPOSITING.

NON-NEGOTIABLE

THE ATTACHED DRAFT IS IN PAYMENT OF THE LOSS-EXPENSE SHOWN BELOW

52-153
112

5259614

MERRIMACK MUTUAL FIRE INSURANCE COMPANY
ANDOVER, MASSACHUSETTS

DATE ISSUED
12/14/17

PAY *Forty nine thousand nine hundred thirty seven and 35/100 Dollars*

POLICY NUMBER	MOD	LOSS DATE	AMOUNT
SBP 2149827	15	02/15/17	\$49,937.35

TO THE ORDER OF:

WILDFLOWER ESTATES CONDO II

FOR: BUILDING SUPPLEMENTAL

AUTHORIZED SIGNATURE
Through Bank of America

INSURED/CLAIMANT WILDFLOWER ESTATES CON

CLMT L



AGENT: MACKOUL & ASSOC INC
25 NASSAU LANE
ISLAND PARK NY 11558

MEMO:

TYPE: LOSS

MAIL AFFILIATED ADJUSTMENT
TO GROUP LTD
3000 MARCUS AVE STE 3W3
LAKE SUCCESS NY 11042-1009

NOTE: PLEASE REMOVE THIS STUB
BEFORE CASHING OR DEPOSITING.

NON-NEGOTIABLE

THE ATTACHED DRAFT IS IN PAYMENT OF THE LOSS-EXPENSE SHOWN BELOW

52-153
112

5239868

MERRIMACK MUTUAL FIRE INSURANCE COMPANY
ANDOVER, MASSACHUSETTS

DATE ISSUED
07/24/17

PAY *Seven hundred fifty one and 95/100 Dollars*

TO THE ORDER OF:

AFFILIATED ADJUSTMENT GROUP LTD

POLICY NUMBER	MOD	LOSS DATE	AMOUNT
SBP 2149827	15	02/15/17	\$751.95

FOR: BLDG

INSURED/CLAIMANT WILDFLOWER ESTATES CON

CLMT L



AUTHORIZED SIGNATURE
Through Bank of America



NYSCEF DOC. NO. 3

Case 1:19-cv-00220 Document 1-2 Filed 01/11/19 Page 10 of 15 PageID #: 15

RECEIVED NYSCEF: 08/29/2018

AGENT: MACKOUL & ASSOC INC
25 NASSAU LANE
ISLAND PARK NY 11558

MEMO:

TYPE: LOSS

MAIL WILDFLOWER ESTATES CONDO II
TO C/O METRO MGMT DEVELOPMENT INC
42-25 21ST ST
LONG ISLAND CITY NY 11101-4906

NOTE: PLEASE REMOVE THIS STUB
BEFORE CASHING OR DEPOSITING.

NON-NEGOTIABLE

THE ATTACHED DRAFT IS IN PAYMENT OF THE LOSS-EXPENSE SHOWN BELOW

52-153
112

5239869

MERRIMACK MUTUAL FIRE INSURANCE COMPANY
ANDOVER, MASSACHUSETTS

DATE ISSUED
07/24/17

PAY *Nine thousand nine hundred ninety and 13/100 Dollars*

TO THE ORDER OF:

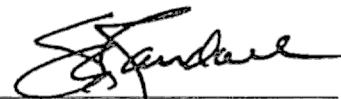
WILDFLOWER ESTATES CONDO II

POLICY NUMBER	MOD	LOSS DATE	AMOUNT
SBP 2149827	15	02/15/17	\$9,990.13

FOR: BLDG

INSURED/CLAIMANT WILDFLOWER ESTATES CON

CLMT L



AUTHORIZED SIGNATURE
Through Bank of America



AGENT: MACKOUL & ASSOC INC
25 NASSAU LANE
ISLAND PARK NY 11558

MEMO:

TYPE: LOSS

MAIL CIPCO BOARDING CO INC
TO PO BOX 824

LYNBROOK NY 11563-0824

NOTE: PLEASE REMOVE THIS STUB
BEFORE CASHING OR DEPOSITING.

NON-NEGOTIABLE

THE ATTACHED DRAFT IS IN PAYMENT OF THE LOSS-EXPENSE SHOWN BELOW

52-153
112

5234316

MERRIMACK MUTUAL FIRE INSURANCE COMPANY
ANDOVER, MASSACHUSETTS

DATE ISSUED
06/08/17

PAY *Three thousand four hundred seven and 79/100 Dollars*

TO THE ORDER OF:

CIPCO BOARDING CO INC

POLICY NUMBER	MOD	LOSS DATE	AMOUNT
SBP 2149827	15	02/15/17	\$3,407.79

FOR: BLDG

INSURED/CLAIMANT WILDFLOWER ESTATES CON

CLMT L


AUTHORIZED SIGNATURE
Through Bank of America



NYSCEF DOC. NO. 3

Case 1:19-cv-00220 Document 1-2 Filed 01/11/19 Page 12 of 15 PageID #: 17

RECEIVED NYSCEF: 08/29/2018

AGENT: MACKOUL & ASSOC INC
25 NASSAU LANE
ISLAND PARK NY 11558

MEMO:

TYPE: SIGNLOS

MAIL AFFILIATED ADJUSTMENT
TO GROUP LTD
3000 MARCUS AVE STE 3W3
LAKE SUCCESS NY 11042-1009

NOTE: PLEASE REMOVE THIS STUB
BEFORE CASHING OR DEPOSITING.

NON-NEGOTIABLE

THE ATTACHED DRAFT IS IN PAYMENT OF THE LOSS-EXPENSE SHOWN BELOW

52-153
112

5234318

DATE ISSUED
06/08/17

MERRIMACK MUTUAL FIRE INSURANCE COMPANY
ANDOVER, MASSACHUSETTS

PAY *Twelve thousand two hundred thirty one and 69/100 Dollars*

TO THE ORDER OF:

AFFILIATED ADJUSTMENT GROUP LTD

POLICY NUMBER	MOD	LOSS DATE	AMOUNT
SBP 2149827	15	02/15/17	\$12,231.69

FOR: BLDG

AUTHORIZED SIGNATURE
Through Bank of America

INSURED/CLAIMANT WILDFLOWER ESTATES CON

CLMT L



NYSCEF DOC. NO. 3

RECEIVED NYSCEF: 08/29/2018

AGENT: MACKOUL & ASSOC INC
25 NASSAU LANE
ISLAND PARK NY 11558

MEMO:

TYPE: SIGNLOS

MAIL WILDFLOWER ESTATES CONDO II
TO C/O METRO MGMT DEVELOPMENT INC
42-25 21ST ST
LONG ISLAND CITY NY 11101-4906

NOTE: PLEASE REMOVE THIS STUB
BEFORE CASHING OR DEPOSITING.

NON-NEGOTIABLE

THE ATTACHED DRAFT IS IN PAYMENT OF THE LOSS-EXPENSE SHOWN BELOW

52-153
112

5234317

MERRIMACK MUTUAL FIRE INSURANCE COMPANY
ANDOVER, MASSACHUSETTS

DATE ISSUED
06/08/17

PAY *One hundred fifty nine thousand ninety eight and 93/100 Dollars*

TO THE ORDER OF:

WILDFLOWER ESTATES CONDO II

POLICY NUMBER	MOD	LOSS DATE	AMOUNT
SBP 2149827	15	02/15/17	\$159,098.93

FOR: BLDG

AUTHORIZED SIGNATURE
Through Bank of America

INSURED/CLAIMANT WILDFLOWER ESTATES CON

CLMT L



NYSCEF DOC. NO. 3

Case 1:19-cv-00220 Document 1-2 Filed 01/11/19 Page 14 of 15 PageID #: 19

RECEIVED NYSCEF: 08/29/2018

AGENT: MACROUL & ASSOC INC
25 NASSAU LANE
ISLAND PARK NY 11558

MEMO:

TYPE: LOSS

MAIL AFFILIATED ADJUSTMENT
TO GROUP LTD
3000 MARCUS AVE STE 3W3
LAKE SUCCESS NY 11042-1009

NOTE: PLEASE REMOVE THIS STUB
BEFORE CASHING OR DEPOSITING.

NON-NEGOTIABLE

THE ATTACHED DRAFT IS IN PAYMENT OF THE LOSS-EXPENSE SHOWN BELOW

52-153
112

5226165

DATE ISSUED
04/10/17

MERRIMACK MUTUAL FIRE INSURANCE COMPANY
ANDOVER, MASSACHUSETTS

PAY *Three thousand five hundred and 00/100 Dollars*

TO THE ORDER OF:

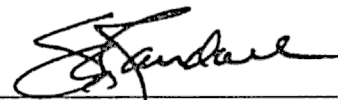
AFFILIATED ADJUSTMENT GROUP LTD

POLICY NUMBER	MOD	LOSS DATE	AMOUNT
SBP 2149827	15	02/15/17	\$3,500.00

FOR: BLDG

INSURED/CLAIMANT WILDFLOWER ESTATES CON

CLMT L



AUTHORIZED SIGNATURE
Through Bank of America



NYSCEF DOC. NO. 3

RECEIVED NYSCEF: 08/29/2018

AGENT: MACKOUL & ASSOC INC

MEMO:

25 NASSAU LANE

ISLAND PARK NY 11558

TYPE: SIGNLOS

MAIL WILDFLOWER ESTATES CONDO II
TO C/O METRO MGMT DEVELOPMENT INC
42-25 21ST ST
LONG ISLAND CITY NY 11101-4906

NOTE: PLEASE REMOVE THIS STUB
BEFORE CASHING OR DEPOSITING.

NON-NEGOTIABLE

THE ATTACHED DRAFT IS IN PAYMENT OF THE LOSS-EXPENSE SHOWN BELOW

52-153
112

5226088

MERRIMACK MUTUAL FIRE INSURANCE COMPANY
ANDOVER, MASSACHUSETTS

DATE ISSUED
04/10/17

PAY *Forty six thousand five hundred and 00/100 Dollars*

TO THE ORDER OF:

WILDFLOWER ESTATES CONDO II

POLICY NUMBER	MOD	LOSS DATE	AMOUNT
SBP 2149827	15	02/15/17	\$46,500.00

FOR: BLDG

AUTHORIZED SIGNATURE
Through Bank of America

INSURED/CLAIMANT WILDFLOWER ESTATES CON

CLMT L

